

# YEAR IN REVIEW:



## 2008-2009 Progress Report of the *Wyoming Cancer Control Plan*

This report highlights the progress and accomplishments of the Wyoming Comprehensive Cancer Control Consortium (WCCCC). This group of over 250 members, representing over 90 diverse organizations, works to achieve the objectives of the 2006-2010 Wyoming Cancer Control Plan. The WCCCC is dedicated to improve cancer prevention, increase early detection, ensure quality diagnosis and treatment, and support research and policy issues to improve the quality of life of all Wyoming people, including survivorship and palliative care efforts.

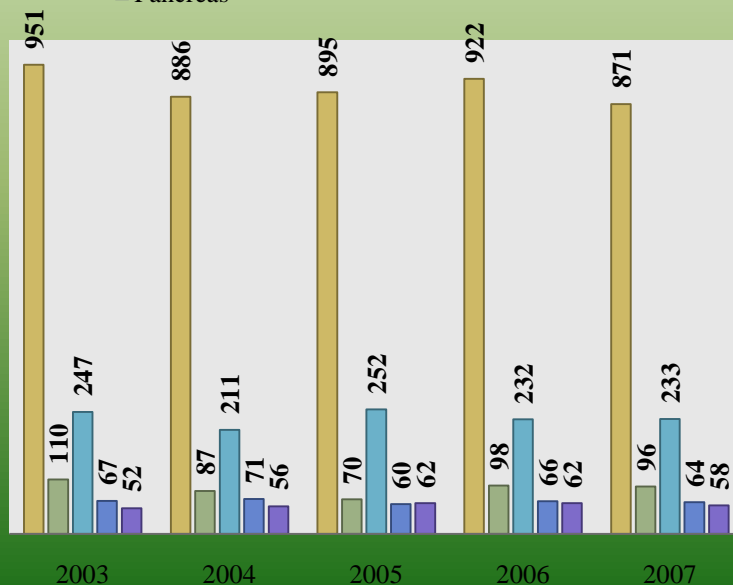
Additionally, this report provides a snapshot of trends in cancer incidence and mortality rates, as well as risk factor data and progress made in reducing behaviors that aid in the development of many cancers. As you review this report, we hope you will join us in recognizing the contributory efforts of the WCCCC.

By working together, we truly make a difference in the health and quality of life of those impacted by cancer in the State of Wyoming. Great strides have been made toward eliminating social, personal, and economic barriers that impact Wyoming families, friends, and neighbors.

For those who are not involved in the current cancer prevention and control efforts, we invite you to join us in this essential endeavor. If you would like more information about the cancer initiatives and how you can become involved, please visit: [www.fightcancerwy.com](http://www.fightcancerwy.com).

### CANCER MORTALITY - WY CASES

■ All Malignant Cancers ■ Colon and Rectum  
■ Lung and Bronchus ■ Breast  
■ Pancreas



# YEAR IN REVIEW

## PROGRESS HIGHLIGHTS

### Policy Change

**Wyoming Cancer Resource Services** - Funding for the Regional Cancer Resource Navigator projects, now named Wyoming Cancer Resource Services, was allocated by the Wyoming State Legislature in the amount of \$495,000. This navigation model allows us to reach all Wyoming residents impacted by cancer through education, outreach, emotional support, networking/coalition building,

**Wyoming Insurance Solutions Legislation-** The Wyoming Insurance Solutions Health insurance enhancements ensure Wyoming men and women receive the care they need. Senate Files 62 and 95 were brought forth by the 60<sup>th</sup> Wyoming State Legislature. These pieces of legislation provide consumer protection to Wyoming residents who purchase health insurance policies and rely on them to cover lifesaving treatment and drugs their doctors deem necessary.

Senate File 62 prohibits “*discretionary clauses*” in policies, which leaves ultimate coverage decisions up to the health insurance insurers, even if medical evidence favors the insured person. Senate File 95 places a much needed definition of “*medical necessity*” into state law, so both the insured and insurance companies know how claims will be judged. Additionally Senate File 95 establishes a process for a mandatory external review of contested insurance claims. Forty-five states and the District of Columbia all have a similar external review mandates. On March 2, 2009, Governor Dave Freudenthal signed Senate File 62 and 95 into law in his chambers at the Wyoming State Capitol.

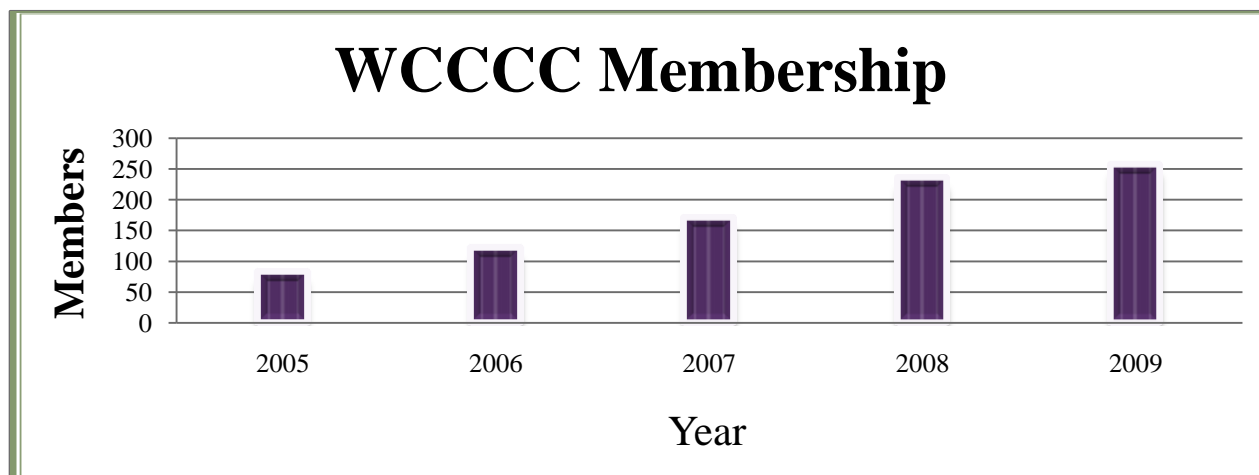
**Youth Access to Tobacco Cessation** – Senate File 35 was passed to allow Wyoming youth (under 18) access to tobacco cessation programs. Under previous law, a clause prohibited any type of “counseling service” to minors without parent consent. This legislation allows minors to access essential services to assist in quitting tobacco use, thereby saving precious lives and reducing future healthcare costs to the State of Wyoming as a result of tobacco-related illness.

### Honorable Mention

While the following legislative policies were not passed during this progress period, honorable mention is important as they all work to reduce the impact of cancer on Wyoming men, women, and children. The WCCCC worked collaboratively with other stakeholders to educate policymakers on these health-related issues.

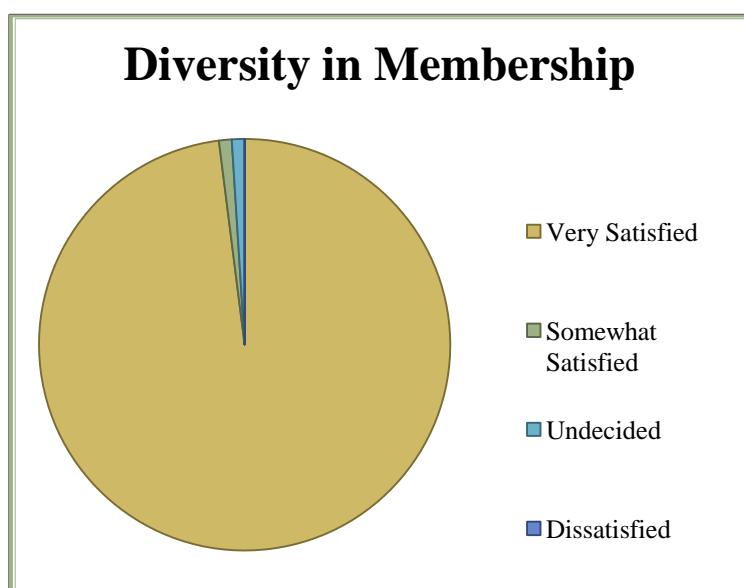
- HB0031 Smoking in Enclosed Places
- HB0178 Tanning Salons- Minors
- HB0197 Breast Cancer License Plates
- HB0224 Cigarette Tax
- HB0067 Tobacco Excise Tax (Chewing Tobacco)

# Recruitment and Retention



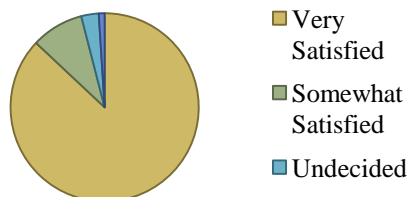
In an effort to raise awareness about cancer prevention and control, and to gain momentum in Wyoming's fight against cancer, the WCCCC continues to actively recruit and retain individual members and partner organizations to decrease the impact of cancer on the people of Wyoming. The WCCC held two annual meetings this year as well as workgroups of the Consortium meeting separately several times this year. In 2008-2009 membership increased by nine percent. The Comprehensive Cancer Program continued to receive funds to provide coordination for the WCCC. The Wyoming Cancer Conference was held in April 2009 with over 100 people attending.

## Partner Satisfaction Survey Results

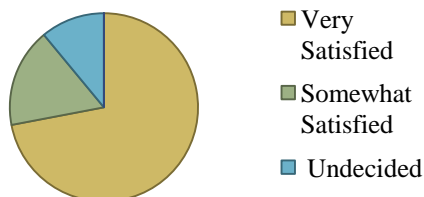


Each year, members of the WCCCC are requested to complete a partner survey. The survey is an important measure in determining partner satisfaction, implementation progress, and current outcomes as a result of WCCCC efforts. The data received helps improve WCCCC membership, leadership, cancer control infrastructure, communication, activity development and other key performance areas.

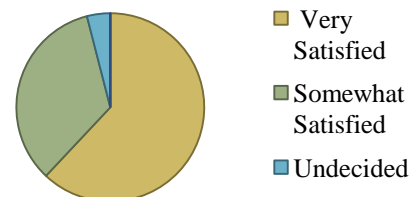
### Strength and Competence of Leadership



### Follow Through / Outcome on Year 1 Priority Projects



### Your Personal / Agency Involvement



## C-Change Exemplary State Coalition Award

C-Change is a national organization comprised of the nation's key cancer leaders from government, business, and nonprofit sectors. C-Change is comprised of about 130 Members—including the heads of federal and state governmental agencies, private businesses, the motion picture industry, and nonprofit groups—whose missions relate to cancer research, control, and/or patient advocacy. Co-chairs for the national group include former President H.W. Bush and First Lady Barbara Bush. These cancer leaders share the vision of a future where cancer is prevented, detected early, and cured or is managed successfully as a chronic illness. The development and implementation of state, tribe, and territory comprehensive cancer control (CCC) program plans has been a strategic priority of C-Change since its founding in 1998.

Each year, C-Change provides national awards for statewide exemplary coalitions in states, tribes and territories, as well as identifies leaders in cancer policy.

In June, 2009, C-Change awarded the Wyoming Cancer Control Consortium with the 2009 Exemplary State Comprehensive Cancer Control [CCC] Implementation Award. In addition, Wyoming House Representative Ken Esquibel (and Co-Chair of the WCCCC) was awarded Exemplary State Elected Official Comprehensive Cancer Control Leadership Award.



# Colorectal Cancer Program



From November 15, 2007 through August 1, 2009, the Wyoming Colorectal Cancer Screening Program (WCCSP) has provided colonoscopies to approximately 900 Wyoming residents. Of those screened, 43 percent had polyps removed. Of those who had preventive polypectomies, 42 percent had pre-cancerous lesions identified in their pathology reports, and 14 cancers were diagnosed.

During the above-mentioned timeframe, the WCCSP has processed over 1,200 applications. The program reports an enrolment rate of 69.5 percent of all applications received. More women (69%) are screened through the program than men (31%). Of the patients that have been screened by the program, 35 percent of were symptomatic before screening and 25 percent had a family history of colorectal cancer.

Through August 1, 2009, approximately \$1.3 million in general fund monies had been reimbursed to Wyoming providers for costs relating to screening. The WCCSP has service contracts with 238 Wyoming providers and facilities.

They WSSCP reports a 67.7 percent return rate on their patient satisfaction survey. The results from that survey show that 93 percent of the patients feel they were sent the application in a timely manner, 96 percent were pleased by the way their doctors treated them. 98 percent would recommend the WCCSP to a friend and 100 percent of patients indicate the program staff was friendly and easy to talk to.

## Areas for Improvement

While the program has made significant progress in reaching Wyoming's highest risk and medically underserved, there is still room for improvement. The following areas have been identified as improvements that can be made to strengthen the program and reach those who need services most in the State of Wyoming.

1. **A change in the language to the Cancer Control Act eliminating the 10-year rule to allow for adequate follow-up for those who have had precancerous polyps removed.** *Evidence-based research and screening guidelines support the necessity of follow up colonoscopy at various intervals. The WCCSP would benefit from authorization to provide follow-up screening based on the latest clinical guidelines for rescreening; which can be determined based on the pathology results submitted to the program.*
2. **Coverage of colonoscopy by insurance companies.** *Currently Wyoming law mandates coverage for breast, cervical and prostate cancer screening by health insurance plans. Colorectal cancer screening is not covered service. Currently, 1/3 of program enrollees report no insurance coverage, or inadequate coverage.*
3. **Treatment funds for cancers identified through the WCCSP.** *A treatment fund for those program enrollees diagnosed with colon cancer who are not covered by any type of health insurance.*
4. **Ensure adequate provider reimbursement for services.** *Reimbursement rates, whether traditional fee-for-service rates or capitation rates for managed care providers, must be sufficient in order to ensure that Medicaid programs have enough providers to deliver care. However, states have often looked to save money by lowering payments to providers who deliver health care services to Medicaid beneficiaries. This cost crunch has resulted in provider payment rates that are often substantially below market rates.*

# Cancer Risk Factors

## Measure

**2003  
Baseline  
(%)**

**Most  
Current  
Data  
(%)**

**95%  
Confidence  
Interval**

**U.S.  
Median  
(%)**

**2006-  
2010  
Objective  
(%)**

Tobacco Use (Adults)	32.7	27.7 (2008)	26.3-29.1		
Cigarette Use (High School)	26.0	20.8 (2007)	18.6-23.3		
Smoking quit attempts (Adults)	47.1	48.6 (2008)	44.5-52.7		
Smoking quit attempts (High School)	57.8	55.7 (2007)	51.0-60.4		
Eats fruits and vegetables at least 5 times per day (Adults)	22.1	24.4 (2007)	22.9-26.0	24.4	40.0
Obesity- BMI $\geq 30$ (Adults)	20.1	25.2 (2008)	24.0-26.5	26.3	15.0
Meets physical activity recommendations (Adults)	55.4	56.7 (2007)	55.0-58.4	56.7	65.0
No leisure time physical activity (Adults)	21.1	24.4 (2008)	23.2-25.6	22.6	15.0
Eats 5 or more servings of fruits and vegetables per day (High School)	22.5	17.3 (2007)	15.7-19.1		
Physically active for at least 60 minutes per day on 5 or more of the past 7 days (High School)		48.2 (2007)	45.0-51.4		
One or more sunburns in the past 12 months (Adults)	48.2 (2006)	48.3 (2008)	46.8-49.7	36.0	35.0
Tanning booth/bed or sunlamp use (Adults)		12.5 (2006)	11.4-13.8		
Children less than 18 years of age reporting one or more sunburn in the past 12 months	51.2 (2006)	51.9 (2008)	49.5-54.4		
No healthcare provider (Adults)	23.9	26.6 (2008)	25.3-28.0	18.4	18.0
Unable to get needed care due to cost (Adults)	12.5	11.8 (2008)	10.9-12.8	12.3	10.0

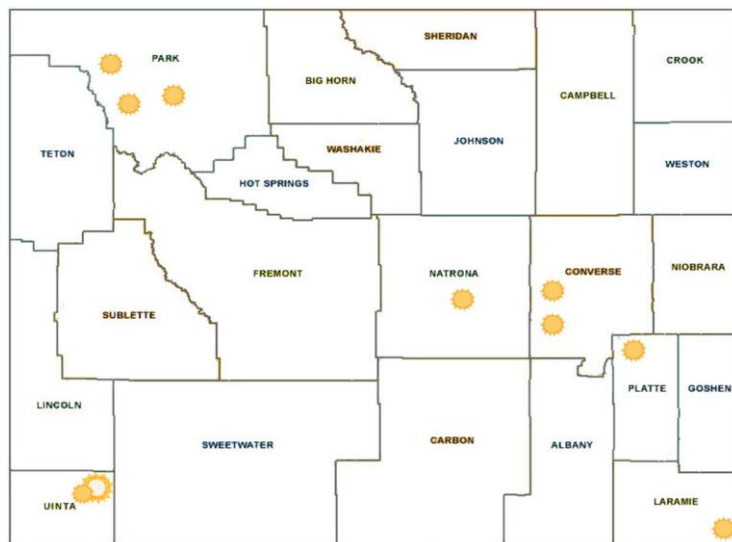


## Cancer Risk Factors

Measure	2003* Baseline (%)	Most Current Data (%)	95% Confidence Interval	U.S. Median	2006-2010 Objective
Adults (18-64) reporting no health insurance	19.9	18.4 (2008)	17.0-19.8	14.2	15.0
Mammography within past 2 years (females)	69.6	67.2 (2008)	65.4-68.9	76.5	78.0
Recent Pap Smear (women with cervix)	83.6	78.4 (2008)	76.3-80.4	84.0	88.0
Adults age 50+ reporting Colonoscopy or Sigmoidoscopy	50.9	56.0 (2008)	54.5-57.6	57.1	60.0
Adults age 50+ reporting home stool testing	18.5	17.5 (2008)	16.4-18.7	24.2	35.0
Adults reporting their smoking policies does not allow smoking in workplace areas	78.5	83.2 (2008)	81.3-84.9	---	85.0
Adults reporting their home has been tested for radon	26.0 (2002)	29.0 (2007)	27.4-30.7		50.0
Adults knowledgeable about the health effects of radon	57.8 (2002)	71.0 (2007)	69.3-72.6		25.0

## Wyoming Sun Safe Schools

The Wyoming Sun Safe Schools of Distinction project was formed in an attempt to raise awareness and enhance school policies surrounding sun safety in the state. In order to obtain a sun safe school award, a school must meet various sun safety criteria surrounding education, promotion of sun safe measures, implementation of sun safe measures by students and staff, family and community involvement, and sun safety policy evaluation. To review the criteria and learn more about sun safe schools, visit [www.fightcancerwy.com](http://www.fightcancerwy.com).



Map is representative of all Wyoming counties with sun safe school policies in place in local schools. Uinta County has achieved sun safe status in all schools thus making the entire district sun safe.

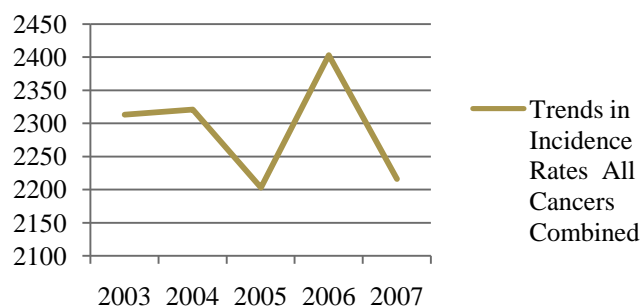
# YEAR IN REVIEW:

## INCIDENCE & MORTALITY

### All Cancers

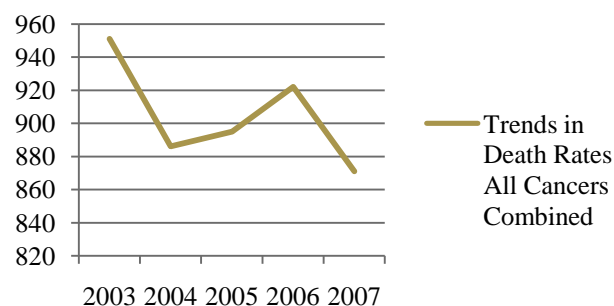
#### Trends in Incidence Rates

All Cancers Combined



#### Trends in Death Rates

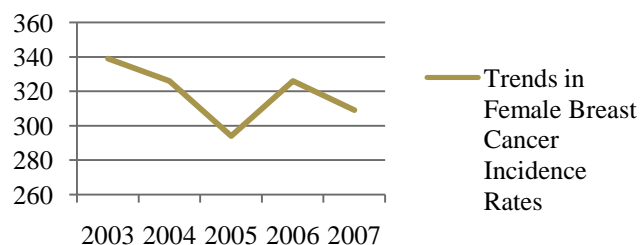
All Cancers Combined



### Breast Cancer (female only)

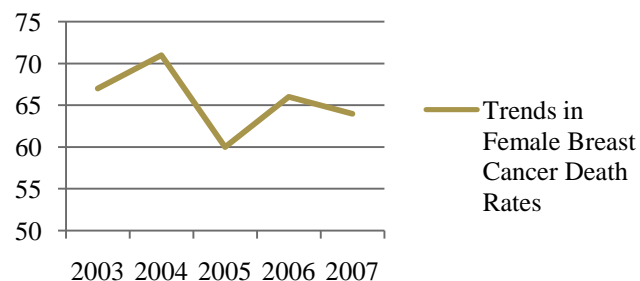
#### Trends in Breast Cancer Incidence Rates

Wyoming 2003-2007



#### Trends in Breast Cancer Death Rates

Wyoming 2003-2007

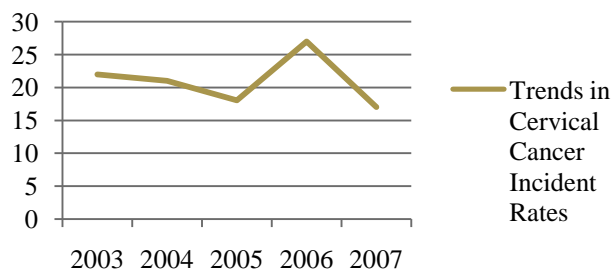




# Cervical Cancer

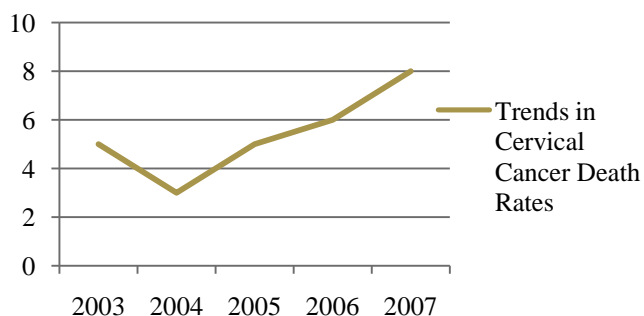
**Trends in Cervical Cancer Incident Rates**

*Wyoming 2003-2007*



**Trends in Cervical Cancer Death Rates**

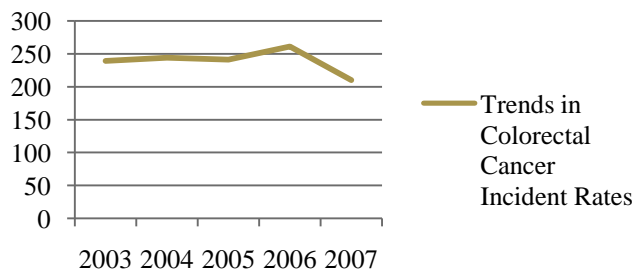
*Wyoming 2003-2007*



# Colorectal Cancer

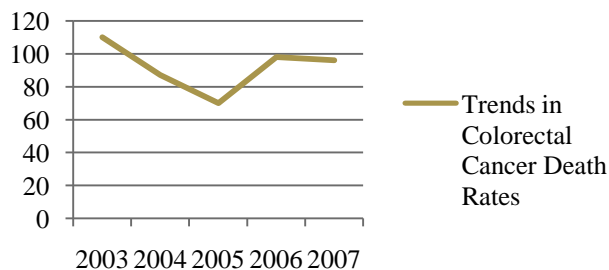
**Trends in Colorectal Cancer Incident Rates**

*Wyoming 2003-2007*



**Trends in Colorectal Cancer Death Rates**

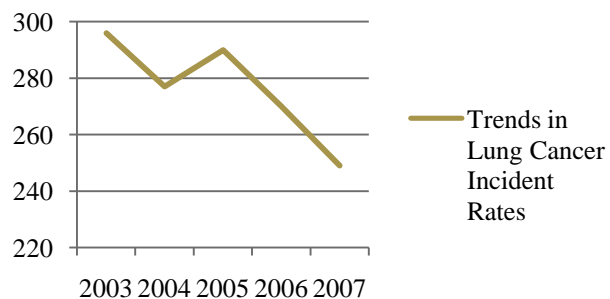
*Wyoming 2003-2007*



# Lung Cancer

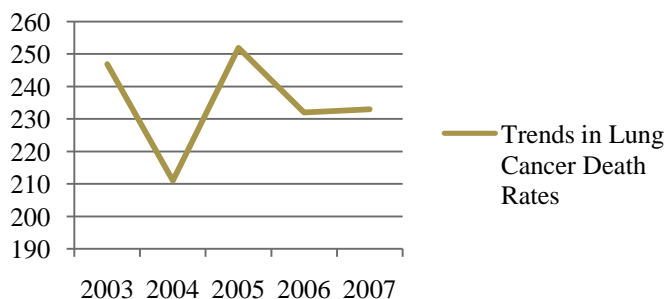
**Trends in Lung Cancer Incident Rates**

*Wyoming 2003-2007*



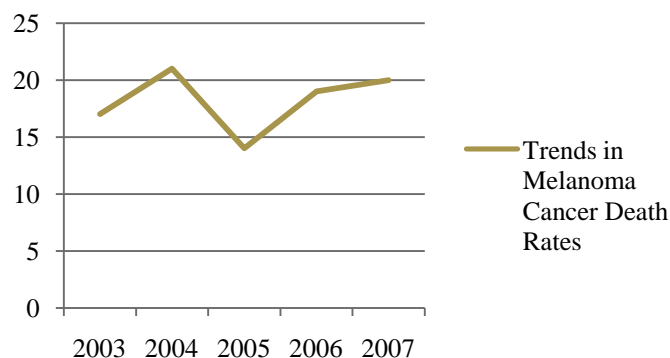
**Trends in Lung Cancer Death Rates**

*Wyoming 2003-2007*

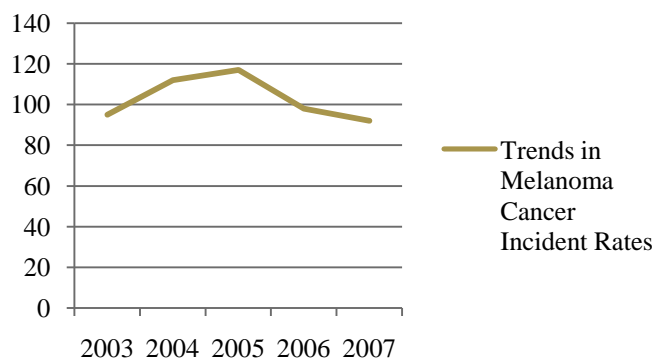


# Melanoma

**Trends in Melanoma Death Rates**  
*Wyoming 2003-2007*

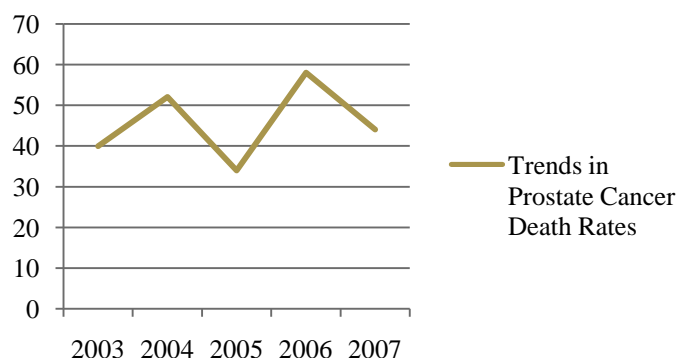


**Trends in Melanoma Incident Rates**  
*Wyoming 2003-2007*

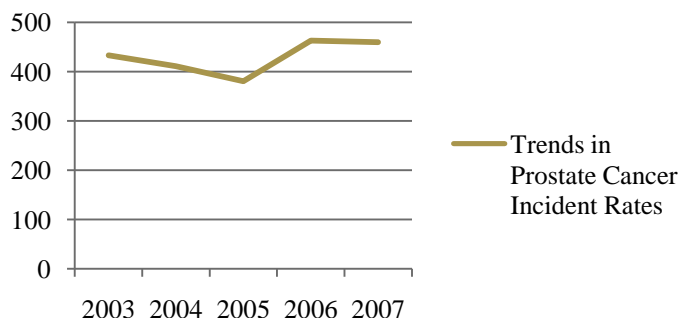


# Prostate

**Trends in Prostate Cancer Death Rates**  
*Wyoming 2003-2007*



**Trends in Prostate Cancer Incident Rates**  
*Wyoming 2003-2007*



## Wyoming Comprehensive Cancer Control Consortium

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